

## NEVADA FINANCIAL DISCLOSURE STATEMENT (FDS) JAN 0 2 2008

(Please read the instructions before completing.)

COMMISSION ON ETHICS

PERSONAL INFORMATION:							
NAME: Samuel Allen Thompson			LEI	NGTH OF RES	IDENCE IN NE	VADA: 4 1/2	years
ADDRESS: 10417 Wellington Manor Avenue							
CITY, STATE, ZIP: Las Vegas, NV 89129						STRICT WHER 281A.620(1)(a)):	
TELEPHONE: 702 515-0467			E-M	Ali ·	amT@aol.co		
SECTION A (Public Office): List all public offices for and check each box accordingly i.e. annual, candida  • ANNUAL all elected and appointed public officers (no CANDIDATE (no later than the 10th day after the last • APPOINTMENT to fill unexpired term of an elected of Public Office	ate or ap o later tha t day to qu	opo an J ualif ed p	intment filing: an. 15 each year fy as a candidate oublic officer (with Annual	r) ) nin 30 days) Term or	ANNUAL NRS 281A.600.1(b)	CANDIDATE NRS 281A.610.1(a)	620.1(g)]  APPOINTMENT NRS 281A.600.1(a)
Commissioner, Nevada Public Utilites Commission	(ÉorA)		Compensation	Date Appointed	281A.610.1(b)		
Commissioner, Novada i diffic Galles Commission	ļ	P	112,091.00	7-16-07			니
	A A	-					
OFOTION D (O				L		4* <b>A.</b>	4.5.
SECTION B (Sources of Income): List each source of member of your household who is 18 years of age of the second s	•		٠	•	iistea in Sec	Dion A), or tha	at of any
		į		r		Self	Household
Shelby County (Tennessee) Retirement System						<b>7</b>	Member
Tennessee Consolidated Retirement System				· · · · · · · · · · · · · · · · · · ·			<u></u>
Social Security Disability		-					<b>7</b>
SECTION C (Real Property): List specific location ar which you or a member of your household has a lega more; and (3) located in this state or an adjacent sta Specific Location	al or be	nef	icial interest; (2			f which is \$2,	
					ratucula	<u> USE</u>	
NONE						· · · · · · · · · · · · · · · · · · ·	<del></del>

	tor vehicle for personal use was retained by seller] [NRS 281A.6	Self	Househol Member
NONE			IVICITIDE:
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\$200 from a donor during the preceding the third degree of consanguinity or affini	onor and value of each gift of all gifts received in excess of an a taxable year [EXCEPT: (1) a gift received from a person who is ity; and (2) ceremonial gifts received for a birthday, wedding, a r does not have a substantial interest in your legislative, admin	s related to y nniversary,	you within <b>holiday</b>
NONE Donor	<u>Gift</u>	Value	of Gift
		\$	
		\$	
		\$	
		\$	
		<u> </u>	
		\$	
including a proprietorship, partnership, fil	h business entity (i.e., organization or enterprise operated for orm, business, trust joint venture, syndicate, corporation or asso	ciation) with	which
including a proprietorship, partnership, fill you or a member of your household is infilmited or general partner, or holder of a continuous con	rm, business, trust joint venture, syndicate, corporation or asso <b>volved as a trustee, beneficiary</b> of a trust, director, officer, own class of stock or security representing 1% or more of the total	ciation) with er in whole (	which or in part,
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